

Texas Commission on Environmental Quality

CHECKLIST WORKSHEET

IHW RCRA INTERIM STATUS FACILITY CME GROUNDWATER CHECKLIST 3

Reg Ent Name : _____

Date : _____

Add ID _____

Investigator Name _____

Item No.	Description	Answer	Citations	Notes
	SECTION A: RECORD-KEEPING AND RESPONSE (Interim Status)			
1	Interim Status Detection Monitoring: Does the facility have units or Waste Management Area(s) operating under Interim Status Detection Monitoring? (if No, Skip Section A.1.)			
1A	Has the facility submitted to the executive director by January 25 of each year:		335.117(b)(2) 335.117(a)(2) 335.117(a)(2)(C) 335.117(a)(2)(B) 335.117(b) 265.94(a)(2) 265.94(a)(2)(i) 265.94(a)(2)(ii) 265.94(a)(2)(iii) 265.94(b)(2)	
1AI	Concentrations and statistical analyses of the indicator parameters?			
1AII	Concentrations of ground-water quality parameters?			
1AIII	Results of evaluation of ground-water surface elevations?			
1B	Was the first year background sampling program adequately completed and reported?		335.112(a)(5) 335.116(b) 265.92(b) 265.92(c)	
1C	Are wells sampled and analyzed annually for ground water quality parameters?		335.112(a)(5) 335.116(b) 265.92(d)(1)	
1D	Are wells sampled and analyzed semi-annually for contamination indicator parameters?		335.112(a)(5) 335.116(b) 265.92(d)(2)	
1E	Are ground water surface elevations determined at each well for each sampling event?		335.112(a)(5) 335.116(b) 265.92(e)	
1F	Does the facility have an adequate GW Quality Assessment Plan?		335.116(b) 335.112(a)(5) 265.93(a)	

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1G	Are 4 replicate measurements of indicator parameters made for each upgradient and downgradient well sample?		335.112(a)(5) 335.116(b) 265.93(b)	
1H	Are statistical comparisons, using the Student's t-test at the 0.01 level of significance, performed?		335.116(b) 335.112(a)(5) 265.93(b)	
1I	If there is more than one upgradient well? Are all the background data combined resulting in one background mean with variance for each contamination parameter, or is each upgradient well mean and variance compared separately with down-gradient well analyses?		335.112(a)(5) 335.116(b) 265.92(c)(2)	
1J	If significant increases (or pH decreases) in contamination indicator parameters were found in the upgradient wells, did the company report the upgradient well change on the annual report?		335.112(a)(5) 335.116(b) 265.93(c)	
1K	If significant increases (or pH decreases) in downgradient wells were detected, did the company:		335.116(b) 335.112(a)(5) 265.93(c) 265.93(d)(2) 265.93(d) 265.93(c)(2)	
1K1	Resample the "affected" well(s), split the sample in two, and re-analyze for the parameter(s) that showed significant difference?		335.116(b) 335.112(a)(5) 265.93(c)(2)	
1K2	If the significant difference was confirmed, then did facility notify the TCEQ Executive Director within 7 days of confirmation?		335.116(b) 335.112(a)(5) 265.93(d)(2)	
1K3	Submit a certified Ground Water Quality Assessment Plan within 15 days of notifying the Executive Director?		335.112(a)(5) 335.116(b) 265.93(d)(2)	
1L	If the results of a Ground-Water Quality Assessment indicate that no hazardous waste or constituents were detected in the ground water, did the facility resume ground water monitoring?		335.116(b) 335.112(a)(5) 265.93(d)(6)	
1L1	If complaint, when was detection monitoring resumed?			
1M	Has the facility modified the t-test procedure to reduce the occurrence of "false positive" statistical indications?			
1M1	Describe changes:			
1M2	Date of TCEQ approval:			
1N	Has the facility substituted other parameters in place of pH, conductivity, TOC and/or TOX?			
1N1	List the parameters:			
1N2	Date of TCEQ approval:			

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2	Interim Status Assessment Monitoring: Does the facility have units or Waste Management Area(s) operating under Interim Status Assessment Monitoring? (if No, Skip Section A.2)			
2A	Has the facility submitted to the executive director by January 25 of each year:		335.117(a)(1) 335.117(a)(2)(A) 335.117(a)(2)(B) 335.117(a)(2)(C) 335.117(a) 335.117(a)(2)	
2A1	Concentrations and statistical analyses of the indicator parameters?			
2A2	Concentrations of ground-water quality parameters?			
2A3	Results of evaluation of ground-water surface elevations?			
2A4	Results of ground-water quality assessment program?			
2B	Does the facility keep these records throughout the active life of the facility, and for disposal facilities, throughout the post-closure care period as well?		335.117(b)(1)	
2C	Has the facility started to implement an approved Ground Water Quality Assessment Plan?		265.93(d)(4) 335.116(b) 335.112(a)(5) 265.93(d)(4)(i) 265.93(d)(4)(ii)	
2C1	If yes, date plan was started?			
2D	If the Ground Water Quality Assessment Plan is in progress, give projected completion date and describe actions to date:			
2E	Is the facility on schedule?			
2F	If the plan has been completed, did the facility submit a Ground Water Quality Assessment Report?		335.112(a)(5) 335.116(b) 265.93(d)(5)	
2F1	If yes, give date submitted:			
2G	Do results indicate that hazardous waste or constituents have been detected?			
2G1	If yes, has a Quarterly Assessment Monitoring Program been implemented?		335.112(a)(5) 335.116(b) 265.93(d)(7)	
2G2	If no, was detection monitoring reinstated?		335.116(b) 335.112(a)(5) 265.93(d)(6)	
	+++NOTE: IF ANSWER TO QUESTION 2G2. IS NO, SKIP THE REMAINING QUESTIONS+++			
2H	List the hazardous waste constituents detected and concentrations: (or Attachment #).			
2I	Has the facility's Sampling and Analysis Plan been revised to include these parameters?			

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2J	Quarterly, since completion of the assessment, has the facility continued to:			
2J1	Sample and analyze for hazardous waste or constituents?		335.112(a)(5) 335.116(b) 265.93(d)(7)	
2J2	Determine rate and extent of migration of hazardous waste or Citable / Compliant constituents?		335.112(a)(5) 265.93(d)(4)(ii) 265.93(d)(4)(i) 265.93(d)(4) 335.116(b)	
2K	Annually, has the facility reported the results of the assessment program (with annual waste report), to include the calculated (or measured) rate of migration of hazardous waste or constituents in ground water during the reporting period?		335.116(b) 335.112(a)(5) 265.94(b)(2)	
2L	If t-test failures have occurred during the post-closure care period, has facility complied with:		335.116(b) 335.112(a)(5) 265.93(c) 265.93(d)	
2L1	Retesting to confirm t-test failures?			
2L2	Notifying TCEQ within 7 days of confirmation?			
2L3	Submittal of approved ground-water quality assessment plan?			
2L4	Implementation / Completion of approved plan?			

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